

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	1					
4		3				
5		3				
6		3				
7		3				
8		3				
9		3				
10		3				
11	1	1				
12		①				
13	1					
14	1					
15	1					
16		3				
17		1				
18		①				
19		②				
20		③				
21		④				
22		⑤				
23	1					
24		3 ✓				
25		⑥				
26	1					
27		4 ①				
28	1					
29		1				
30		1				
31		1				
32		1				
33		1				
34		1				
35		1				
36		1				
37		1				
38		1				
39	1					
40		1				
41		1				
42		1				
43	1					
44		3 ✓				
45		3 ✓				
46		3 ✓				
47		3 ✓				
48		3 ✓				
49		⑧ 1				
50		⑨ 1				
TOTAL IND.	11					
TOTAL DEP.	67					
TOTAL CLAIMS	78					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	3	✓				
52	3	✓				
53	3	✓				
54	3	✓				
55	3	✓				
56	①	✓				
57	④	✓				
58	3	✓				
59	3	✓				
60	3	✓				
61	3	✓				
62	3	✓				
63	3	✓				
64	1	✓				
65	1	✓				
66	3	✓				
67	1	✓				
68	1	✓				
69	1	✓				
70	3	✓				
71	3	✓				
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97						
98						
99						
100						
TOTAL IND.	13	✓				
TOTAL DEP.	134	✓				
TOTAL CLAIMS	147	✓				

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS